



Bureau of HIV and STD Prevention

HIV/STD Clinical Resources Division
HIV/STD Epidemiology Division
HIV/STD Health Resources Division

Est. June 3, 1998

Rev. September 7, 2001

HIV/STD Policy No. 530.002

BUREAU EXPECTATIONS AND PROVIDER RIGHTS REGARDING THE DELIVERY OF CLIENT SERVICE

PURPOSE

This policy clarifies the rights of a Contractor/Subcontractor (Provider) in responding to unacceptable client behavior while providing HIV/STD prevention, treatment, and social services under a contract with the Texas Department of Health (TDH), Bureau of HIV and STD Prevention (Bureau). Providers reviewing this policy should be able to identify unacceptable client behavior and respond accordingly with reasonable confidence that the actions taken on behalf of the provider agency regarding a client were appropriate. The policy will also outline what the Bureau expects from the Provider in delivering client services.

BACKGROUND

One part of the Bureau's mission is to provide a wide array of services to persons who have the HIV disease or other STDs. That mission is achieved through contracts with various Providers who deliver those services. The Bureau is responsible for making sure that Providers understand their rights when addressing client behaviors that may be questionable or disruptive. The Provider will, therefore, be able to ensure that services are offered in a manner that is free from disruption. In addition, the Bureau also has certain expectations of how those services are to be delivered to clients and how client rights are to be respected.

AUTHORITY

Civil Rights Code, Title 42, Chapter 21; Rehabilitation Act of 1973, Sect. 794; Age Discrimination Act of 1974; Public Law 88-352; Title VI, and Part 80 of 45 CFR; 25 TAC §§98.41-98.44.

DEFINITIONS AS APPLIED TO THIS POLICY

- Contractor** a legal entity under contract with TDH to provide goods or services to people who are infected or affected by HIV, AIDS or STDs, or to implement goals supporting the Bureau's mission.
- Provider** a person, agency, or facility approved by the TDH that has entered into a contract with TDH, or with a TDH contractor, to deliver state or federal HIV/STD programs to clients.
- Services** program activities offered by a Provider on behalf of the Bureau for prevention, health, medical, and social services.

BUREAU EXPECTATIONS REGARDING THE PROVIDER/CLIENT RELATIONSHIP

The Bureau expects the Provider to maintain client relations of the highest possible quality.

General Bureau expectations

1. Treat each client with respect, consideration and recognition of the client's dignity and individuality.
2. Communicate the need for treatment, care, or services in a culturally sensitive manner.
3. Allow the client to select comprehensive outpatient health and psychosocial support service or to refuse any service without fear of reprisal.
4. Inform the client about treatment or service options, emphasize that it is the client's right to pick an option, and advise the client of several of the alternatives when multiple providers are available for the same service.
5. Assure that service planning, medical treatment and/or counseling plans are determined in cooperation with the client.
6. Maintain a climate in the office or other service delivery setting that is free of physical or mental abuse or exploitation.
7. Enforce local, state or federal laws or regulations (such as no smoking or maintaining a drug-free environment) required to conduct business.
8. Review any decision to modify, suspend, or terminate services.
9. Re-evaluate any modification, suspension, or termination to determine if the client's situation has changed.
10. Give clients an avenue to formally complain about treatment and/or services and the Provider's decision to deny an application, modify, suspend, or terminate client benefits, a mechanism to receive an appropriate and fair review of the complaint, and ensure that there is no reprisal of any type against the client for filing the complaint or grievance.

Confidentiality

The Provider is required to maintain the confidentiality of all information according to state and federal laws. The right to confidentiality begins at the time the client applies for services, at the time the Provider first conducts an evaluation, or when counseling begins.

Equal access to programs and services

The Provider is required to consider client eligibility regardless of age, gender, sexual orientation, marital status, ethnic origin, physical challenge or religious practice. Conversely, the client has a right to refuse any recommended services.

Impartial treatment

Providers must allow the client to make application for any service and/or program. The client must be given fair, impartial treatment in the receipt and processing of the application and in the receipt of services.

Filing a complaint or grievance

Contractors are required to have a written client complaint procedure in place to meet the minimum requirements for client complaints.

All clients have a right to file a complaint or grievance regarding inappropriate Provider behavior, actions, or perceptions of discrimination. The complaint may be filed in accordance with the grievance procedures of the Provider or with the local organization responsible for monitoring the Provider. When all other sources have been exhausted, the client may file the complaint or grievance with the Bureau by calling 1-800-299-AIDS (2437).

In the case of a complaint related to the delivery of clinical services, the client may file a complaint directly to the Bureau without filing a complaint locally if the client so chooses. The Bureau will investigate all complaints in accordance with HIV/STD Policy 020.050, "Public Complaints and Allegations Related to the Delivery of HIV or STD Programs."

GENERAL PROVIDER RIGHTS WHEN DEALING WITH A CLIENT

Each Provider should develop written procedures to deal with clients who may be disruptive or uncooperative. It is the responsibility of the Provider to ensure that staff are well informed about the procedures, and use the procedures consistently in every situation. Providers are expected to use good judgement and attempt to resolve these situations as fairly as possible without undue limitation or denial of client services.

MODIFYING, SUSPENDING, OR TERMINATING CLIENT SERVICES

The Provider is responsible for providing a work environment that remains free from undue disruption, turmoil, or interference. Whenever possible, the Provider should take steps to serve clients in a manner that supports a healthy work environment.

During the course of serving clients, clients may behave in a disruptive, abusive, or threatening manner toward staff or other clients. When this type of behavior occurs, the Provider may take the following progressive action:

1. Modify all or part of the services provided to the client
2. Suspend all or part of the services provided to the client
3. Terminate all or part of the services provided to the client

Depending on the severity of the client's behavior, such as the client threatening the life of staff or other clients, the Provider may skip one or more of the above steps and take appropriate action. Refer to HIV/STD Policy No. 530.003 for information on dealing with clients who threaten to harm themselves or others.

Modifying client services

The Provider may modify all or part of the services provided to the client in situations where the client is disruptive or uncooperative. Modification may include, but is not limited to:

1. rescheduling the client's appointment for a time later that day or in the near future,
2. arranging client services by telephone, and/or
3. mailing food vouchers, bus passes, etc.

Suspending client services

Suspension is the temporary withdrawal of a service or services provided to a client by a Provider. It may be necessary for the Provider to suspend all or part of the services provided to the client for a specific time period when alternative service delivery methods have not produced appropriate client behavior (i.e., the client is repeatedly disruptive or abusive towards staff or other clients).

Terminating client services

The Provider may choose to terminate all or part of the services provided to the client when alternative services delivery methods are not appropriate to the situation (i.e., the client threatens injury or homicide to a staff member or another client, etc.) or when modification or suspension of services has not produced appropriate client behavior.

Clinical service providers (e.g., physicians, advanced practitioners, and registered nurses) who terminate services should follow professional practice standards with regard to how client services are terminated. Professional organizations and/or licensing bodies can provide guidance to clinical service providers for managing these situations.

Denying, suspending, or terminating a client's service on the basis of substance abuse

The Provider may not deny, suspend, or terminate any service funded through TDH because the client is suspected of substance abuse or refuses to accept treatment for substance abuse. Refer to the Housing Opportunities to Persons with AIDS (HOPWA) Program Manual or the HIV/STD Health Resources Division, Field Operations Branch for information regarding HOPWA assistance and substance abuse.

Exceptions to this may occur in the course of delivering medical care when a client's active substance abuse contraindicates the prescription of certain medications and/or treatments.

1 These professional decisions must be evaluated by the treating clinician on a
2 case-by-case basis.

3 4 Notification of the decision to modify, suspend, or terminate client services

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6 The decision to modify, suspend, or terminate services must be communicated to the
7 client in a timely and appropriate manner which may be done by any verifiable method,
8 such as in person or by certified letter. When services are to be modified or suspended,
9 staff should establish and communicate a specific time period for the suspension and
10 inform the client that resumption of services will depend on the client's willingness and
11 ability to meet certain behavior expectations. The behavior expectations should be
12 clearly outlined and communicated to the client. The client should be given information
13 about alternative methods by which services will be delivered or where such assistance
14 may be obtained.

15 16 Documentation

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18 The Provider should ensure that all actions regarding modification, suspension, and
19 termination are clearly documented in the client's record.

20 21 Technical assistance

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23 When desired, the Provider may contact the HIV/STD Clinical Resources Division or
24 HIV/STD Health Resources Division to discuss specific situations or to obtain technical
25 assistance. **Decisions regarding whether to modify, suspend, or terminate client
26 services remain with the Provider.**

27 28 Bureau review of decisions to modify, suspend, or terminate client services

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30 As part of a routine review of the quality of client services or a complaint investigation,
31 Bureau staff may review the events which led to a modification, suspension or
32 termination of client services. Bureau staff will evaluate, at minimum, whether the
33 Provider:

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35 1. followed their internal policies and those of the Bureau in taking action to resolve
36 the situation;
37 2. respected client rights; and
38 3. applied the least restrictive limitation on client services necessary to maintain a
39 service delivery setting that is free of physical and/or mental abuse or exploitation.

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41 DATE OF LAST REVIEW:

42 November 13, 2002 Converted format from WordPerfect to Word.

43 44 REVISIONS

45
46 Page 1, lines 23-24 Deleted "(Also referred to as the sub-contractor)"

1	Page 2, line 11	Added “a climate in the office or other service delivery setting that
2		is” after “Maintain”; deleted “an office climate” before “free”
3	Page 2, line 15-16	Added “modify, suspend, or terminate” and deleted “curtail or
4		reduce” before “services”; deleted “for any reason other than those
5		outlined in this policy.” after “services”
6	Page 2, line 16	Added “modification, suspension,”; deleted “reduction” after “any”
7	Page 2, lines 19-20	Added “a mechanism to receive an appropriate and fair review of
8		the complaint,” after “benefits”
9	Page 2, lines 25	Deleted “However, a person must file a report of suspected child
10		abuse and/or neglect with the appropriate authority. For more
11		information on reporting child abuse or neglect see HIV/STD Policy
12		No. 530.001.”
13	Page 3, line 2	Added “a complaint related to the delivery of” before “clinical”;
14		deleted “also” before “file”
15	Page 3, line 3	Added “without filing a complaint locally if the client so chooses”
16		after “Bureau”
17	Page 3, line 7	Added “or” after “disruptive”; deleted “, who appear to be under the
18		influence of drugs or alcohol or who are otherwise” before
19		“uncooperative”
20	Page 3, lines 8-9	Added new sentence “It is the responsibility of the Provider to
21		ensure that staff are well informed about the procedures, and use
22		the procedures consistently in every situation.”
23	Page 3, line 10	Added “undue limitation or denial of client” after “without” deleted
24		“denying” before “services”
25	Page 3, line 11	Deleted section “ <u>Clients who display disruptive or threatening</u>
26		<u>behavior</u> ”; This section was expanded into new HIV/STD Policy No.
27		530.003 “How to Deal with Clients who Threaten to Harm
28		Themselves or Others”
29	Page 3, line 11-	
30	page 4, line 9	Added new section “MODIFYING, SUSPENDING, OR
31		TERMINATING CLIENT SERVICES”
32	Page 4, line 10	Deleted “ <u>Reducing</u> ” and added “ <u>Denying, suspending</u> ” in section
33		heading
34	Page 4, line 11	Deleted paragraph “Any decision to deny or suspend Housing
35		Opportunities to Persons with AIDS (HOPWA) service on the basis
36		of substance abuse must be supported by a criminal conviction
37		related to substance abuse <u>while the person is a client of the</u>
38		<u>HOPWA program</u> . The Provider may not deny, suspend or
39		terminate HOPWA benefits to a client because the client is
40		<u>suspected</u> of substance abuse.”
41	Page 4, lines 11-12	Deleted “basic to a client’s well being, such as access to
42		transportation or case management,” and added “funded through
43		TDH” after “service”
44	Page 4, line 12-	
45	page 5, line 5	New text.
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